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CONFIRMATION NO. 7703

Bib Data Sheet

SERIAL NUMBER 10/619,903	FILING DATE 07/15/2003  RULE	CLASS 222	GROUP ART UNIT 3754	ATTORNEY DOCKET NO. #10386
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

\*\* 10/20/2003

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> Met after Allowance	CA	DRAWING 4	20	3
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

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## TITLE

Pouring spout

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